PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if different)

NAME: *THE BOEING COMPANY*
ADDRESS: *ROCKETDYNE*
P.O. BOX 7922
CANOGA PARK, CA 91309-7922
FACILITY: *ROCKETDYNE - SANTA SUSANA*
LOCATION: *SIMI HILLS*
ATTN: *BETTINA LEENEY (T487)*

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: CA0001309
(17-19) DISCHARGE NUMBER: DOM 1

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	00	12	01	TO	00	12	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR
(SUBR 04)
F - FINAL
DOMESTIC DISCHARGE #1

Form Approved.
OMB No. 2040-0004
Approval expired 05-31-98

*** NO DISCHARGE [ ] ***

Note: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQ. OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TURBIDITY	SAMPLE MEASUREMENT	*******	*******		******	0.5	*******		0	CONT	N/A
00070 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	2 DAILY AV	******	NTU		DAILY	CONTIN
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	*******	*******		******	348	2,200		0	1/7	24 HC
00310 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MO AVG	REPORT DAILY MX	MG/L		WEEKLY	COMPOS
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	*******	*******		*****	15	26		0	1/7	24 HC
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MO AVG	REPORT DAILY MX	MG/L		WEEKLY	COMPOS
pH	SAMPLE MEASUREMENT	*****	******		7.23	*****	7.93		0	1/7	GRAB
00400 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		WEEKLY	GRAB
pH	SAMPLE MEASUREMENT	*****	******		7.29	*****	7.56		0	1/7	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*******	*******		*******	5,133	9,800		0	1/7	24 HC
00530 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MO AVG	REPORT DAILY MX	MG/L		WEEKLY	COMPOS
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*******	*******		*******	NODI(B)	NODI(B)		0	1/7	24 HC
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MO AVG	REPORT DAILY MX	MG/L		WEEKLY	COMPOS

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE	DATE		
S.R. LAFFLAM, Div. Dir. SHEA	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. sect.1001 AND 33 USC 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*		*818 / 586-2577*	*01*	*01*	*31*
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE/ NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

HDMSP00141999

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DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
CA0001309	DOM 1
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

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FROM	00	12	01	TO	00	12	31
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OIL AND GREASE	SAMPLE MEASUREMENT	*******	*******		******	65	130		0	1/7	GRAB
03582 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MO AVG	REPORT DAILY MX	MG/L		WEEKLY	GRAB
OIL AND GREASE	SAMPLE MEASUREMENT	*******	*******		******	< 5	< 5.1		0	1/7	GRAB
03582 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	REPORT MO AVG	REPORT DAILY MX	MG/L		WEEKLY	GRAB
COLIFORM, TOTAL GENERAL	SAMPLE MEASUREMENT	*******	*******		******	< 2	< 2		0	1/7	GRAB
74056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	2.2 MEDIAN	23 DAILY MX	MPN/ 100 ML		WEEKLY	GRAB
BOD, 5-DAY PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*******		91	*****	*******		0	1/30	CALC
81010 K 0 0 PERCENT REMOVAL	PERMIT REQUIREMENT	******	******	**** ****	85 MO AVG	******	******	PER-CENT		ONCE/ MONTH	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL	SAMPLE MEASUREMENT	*****	*******		100	*****	*******		0	1/30	CALC
81011 K 0 0 PERCENT REMOVAL	PERMIT REQUIREMENT	******	******	**** ****	85 MO AVG	******	******	PER-CENT		ONCE/ MONTH	CALCTD

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